For help completing Form 2, please double-click the (\*)) icon next to each line number.

## FEC FORM 2 STATEMENT OF CANDIDACY

RÉCEIVED FEC MAIL CENTER

1. (a) Name of Candidate (in full)  JACK BURTON ROBINSON JR  (b) Address (mumber and street) P.O. BOX 633 (c) City State, and ZIP Code SPARTANBURG, SC, 29304 PRESIDENT  DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEES (Including Joint Fundaising Representatives)  (a) Name of Committee (in full)  ROBINSON FOR PRESIDENT, LLC  (b) Address (number and street) P.O. BOX 633 (c) City State, and ZIP Code SPARTANBURG, SC, 29304  DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEES (Including Joint Fundaising Representatives)  (a) Name of Committee (in full)  ROBINSON FOR PRESIDENT, LLC  (b) Address (number and street) P.O. BOX 633 (c) City, State, and ZIP Code SPARTANBURG, SC, 29304  DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundaising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of reandidacy.  NOTE: This designation should be filed with the principal campaign committee, to receive and expend funds on behalf of reandidacy.  NOTE: This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  Verifity that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.  Signature of Candidate  Date  NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.	(a) Name of Candidate (in full)			
(c) City, State, and ZIP Code SPARTANBURG, SC, 29304  4. Party Affiliation DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE (year of election)  (a) Name of Committee (in full)  DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)  8. I hereby authorize the following named pointies, which is NOT my principal campaign committee, to receive and expend funds on behalf of no candidacy.  NOTE: This designation should be filed with the appropriate office listed in the instructions.  (a) Name of Committee (in full)  P.O. BOX 633  (c) City, State, and ZIP Code SPARTANBURG, SC, 29304  DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of no candidacy.  NOTE: This designation should be filed with the principal campaign committee.  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code  I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.  Date  11/6/2015	JACK BURTON ROBIN	SON JR		2015 NOV 12 AM 8: 43
SPARTANBURG, SC, 29304  1. Party Affiliation LIBERTARIAN PRESIDENT SOUTH CAROLLINA SCHOOL DISTRICT 6  DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE 7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election(s). (year of election)) NOTE: This designation should be filled with the appropriate office listed in the instructions.  (a) Name of Committee (in full) ROBINSON FOR PRESIDENT, LLC (b) Address (number and street) P.O. BOX 633 (c) City, State, and ZIP Code SPARTANBURG, SC, 29304  DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundralising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of reandidacy.  NOTE: This designation should be filled with the principal campaign committee.  (a) Name of Committee (in full)  (b) Address (number and street)  (c) City, State, and ZIP Code	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	Check if address changed	<b>(</b> (•	
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FEC FORM 2 (REV. 12/2008)

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